4464- 63



APPLICATION FOR RECORDS RETENTION SCHEDULE

OFFICE OF THE SECRETARY OF STATE DEPARTMENT OF ARCHIVES AND HISTORY RECORDS MANAGEMENT DIVISION

	Publication No. 76—RM—1 for instructions on completing is and History, Records Management Division, 330 Capito Section.	
FOR AGENCY USE	1. Agency Address	FOR RECORDS MANAGEMENT USE
Application Date	Department of Medical Assistance 1010 West Peachtree Street, N. W. Atlanta, Georgia 30367	Application Number
		80-402
Application Number		Date Received Date Completed
	/ deolyta 50507	DEC T 2 1980 DEC 1 9 1980
2. Person to Contact	Working Title	Telephone Number
	·	•
	pervisor, Benefits Accounting	894-4693
3. Action Requested	Cabadada a sandarili consinue to programuloto	
	Schedule; record will continue to accumulate. cumulation; no further accumulation anticipated.	•
c. Amend Application		ede: 🗆 Void
4. Dates of Series	5. Records Series Title (followed by title used in office; if	
Earliest Latest		
07-01-77 Present	Benefits Payments Cancelled Check File	
6. Division and Office Function		
:		
The Accounting Offic	e is responsible for monitoring and verify	ying all agency expenditures,
	ccounts payable, and benefits payments.	
	;	
		•
7. Record Series Description	This file contains the following documents (include form a Attach samples of the file.	numbers and titles, if any):
Documents relating to: Ma	intaining records of benefits payments made	de to Medicaid Providers.
Included are: Or	iginal Cancelled Check DMA-46	
ĺ		
		•
File is arranged: Num	erically by check number	• ••.
8. Monthly Reference Rate	How often are records referred to which are:	
One to six months old30 twenty-five months and older	No. of the control of	to twenty-four months old;
9. Annual Rate of Accumulation	on of Records	60 7772 03
Letter-size drawers	; Legal-size drawers; Shelves	;Other (specify) 60 IBM Card File Drawer
		tite Didwel
AR-50-71; Rev. 76	(Over)	

	NO	10. Questionnaire (Place an "X" in the proper column)	
Х		a. Is this the official copy of the series?	•
x	l	If not, where is it? b. Does the series contain confidential information requiring security handling? If yes, cite law or reg	ulation.
	X	c. Is this a vital record?	
	X	d. Does this series have historical or long term research value?	
		e. When one or two documents in the file make it necessary to keep the entire file for a long period, or	ould these
	X	documents be scheduled separately?	·
	X	f. Is the information contained in this series ever published? If yes, attach copy.	
	х	g. Is the information contained in this series ever analyzed and/or recorded in a summarized report? If yes, attach copy.	
	х	h. Is there a duplication of this series in your office, or in another office or agency? If ves. where?	
	X	i. Is this series for a major portion of its regularly microfilmed?	
	X_		
11.	Retent	on Requirements The following requires the series to be kept:	
	a. Sta	e Law 3 years. d. Audit period	3 years.
•	b. Sta		7 years.
1 -47-	c. Fed	ute of limitation	years.
	Attach	copy or excerpt of laws or regulations. Explain administrative need.	.
	Base	d on previous experience cancelled benefits payments checks need to be	retained 7(sever)
	vear	s to enable the Department to verify that payments were made to provide	rs in cases
	invo	lving fraud and abuse of the Medicaid Program.	
12.	Appro	ed Disposition Instructions This agency recommends that the file series be cut off at the end of each	:
		☐ Calendar Year; ☒ Fiscal Year; ☐ Other	then,
		d in the current files area month(s) year(s); then	
		nsfer to local holding area, holdyear(s); then].
	Boutina □ Des	nsfer to State Records Center; hold <u>6</u> year(s); then	•
		rroy. nsfer to State Archives for permanent retention.	1
		er (Specify)	ļ
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	These	nstructions apply to all prior and future accumulations of the series.	
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	<u></u>	nstructions apply to all prior and future accumulations of the series. d/Designee (Signature) Date Records Management Officer (Signature)	Date
	<u></u>	d/Designee (Signature) Date Records Management Officer (Signature)	Date (4.7/12) (53)
	<u></u>		Date 12/12/80
	<u></u>	d/Designee (Signature) Date Records Management Officer (Signature) 2/12/80 Paul / Murphy	12/12/80
Agen	1cy He	d/Designee (Signature) Date Records Management Officer (Signature)	12/12/80 Date
Agen Reco graph	O He	d/Designee (Signature) Date Records Management Officer (Signature) AM, Carry 12/12/80 Paul (Mysly) State Records Committee (Signature) dations in para- e approved. State Auditor/Designee	12/12/80
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